

#100-10-10-B

U.S. Department of Commerce  
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5.00-30

## BASE ISSUE FEE TRANSMITTAL

This form is provided in lieu of a formal transmittal and should be used for transmitting the Base Issue Fee. The sections 1A through 4 below must be completed as appropriate.

## MAILING INSTRUCTIONS

All further correspondence including the Issue Fee Receipt, the Patent, the Notice of Balance of Issue Fee Due if appropriate, and advanced orders will be mailed to the addressee entered in section 1 at the left below, unless you direct otherwise by specifying the appropriate name and address in 1A below.

<b>1.</b>  <b>ROBERT E. ARCHIBALD</b> <b>APPLIED PHYSICS LABORATORIES,</b> <b>JOHN HOPKINS ROAD,</b> <b>LAUREL, MD. 20810</b>	<b>2A.</b> The COMMISSIONER OF PATENTS AND TRADE-MARKS is requested to apply the Base Issue Fee to the application identified below.  <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <div style="display: flex; justify-content: space-between;"> <span>(Signature of person in interest of record)</span> <span>(Date)</span> </div> <div style="display: flex; justify-content: space-between; align-items: center;"> <span>9/15/82</span> </div> </div> <p><b>Note:</b> The Base Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.</p>
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SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	DATE MAILED	EXAMINER AND GROUP ART UNIT
06/034,155	04/27/79	642	06/29/82	JANDORSKI, F 335
<b>First Named Applicant</b> <b>FISCHELL, ROBERT E.</b>				

## TITLE OF INVENTION

(This may have been amended by Exam)

**IMPLANTABLE, PROGRAMMABLE MEDICATION INFUSION SYSTEM**

BASE FEE COMPUTATION	BASE FEE DUE	ATTY'S DOCKET NO.	CLASS - SUBCLASS	BATCH NO.
\$100 + <b>10</b> (for dwg. @ \$2 per sheet) + \$10 =	<b>120</b>	<b>SPL33</b>	<b>12B-260. 000</b>	<b>L32</b>

<b>1A.</b> Further correspondence to be mailed to the following:  <b>Robert E. Archibald, Esq.</b> <b>The Johns Hopkins University</b> <b>Applied Physics Laboratory</b> <b>Johns Hopkins Road</b> <b>Laurel, Maryland 20707</b>	<b>2B.</b> For printing on the patent front page, list below the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed below, no name will be printed.  <div style="margin-top: 10px;"> <b>1 Robert E. Archibald</b>  <b>2 Marc A. Block</b>  <b>3 Samuel L. Sachs</b> </div>
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## DO NOT USE THIS SPACE

<table style="width: 100%;"> <tr> <td style="width: 30%;">09/27/82 034155</td> <td style="width: 20%;">2 106</td> <td style="width: 50%;">100.00 CK</td> </tr> <tr> <td>09/27/82 034155</td> <td>2 107</td> <td>10.00 CK</td> </tr> <tr> <td>09/27/82 034155</td> <td>2 108</td> <td>10.00 CK</td> </tr> <tr> <td>09/27/82 034155</td> <td>2 301</td> <td></td> </tr> </table>	09/27/82 034155	2 106	100.00 CK	09/27/82 034155	2 107	10.00 CK	09/27/82 034155	2 108	10.00 CK	09/27/82 034155	2 301		<b>3.</b> ASSIGNMENT DATA (print or type)  <table style="width: 100%;"> <tr> <td style="width: 50%;"> <b>A.</b> (1) <input type="checkbox"/> This application is NOT assigned.  (2) <input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office.  (3) <input type="checkbox"/> Assignment submitted herewith. </td> <td style="width: 50%;"> <b>The following fees are enclose:</b>  <input checked="" type="checkbox"/> Base fee    <input checked="" type="checkbox"/> Advanced order    <input type="checkbox"/> Assignment recording </td> </tr> </table>	<b>A.</b> (1) <input type="checkbox"/> This application is NOT assigned. (2) <input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office. (3) <input type="checkbox"/> Assignment submitted herewith.	<b>The following fees are enclose:</b> <input checked="" type="checkbox"/> Base fee <input checked="" type="checkbox"/> Advanced order <input type="checkbox"/> Assignment recording
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<b>A.</b> (1) <input type="checkbox"/> This application is NOT assigned. (2) <input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office. (3) <input type="checkbox"/> Assignment submitted herewith.	<b>The following fees are enclose:</b> <input checked="" type="checkbox"/> Base fee <input checked="" type="checkbox"/> Advanced order <input type="checkbox"/> Assignment recording														
<b>B.</b> For Printing On The Patent: (Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data below is only appropriate when an assignment has been previously submitted to the PTO or is submitted herewith. Completion of this form is NOT a substitute for filing of an assignment as required by 37 C.F.R. 1.334).  (1) NAME OF ASSIGNEE: <b>The Johns Hopkins University</b> (2) ADDRESS: (City & State or Country) <b>Baltimore, Maryland 21218</b> (3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION: <b>Maryland</b>	<b>4.</b> 5.00 CK  <b>The following fees should be charged to deposit acc. no. _____</b> (PTOL-85c must be enclosed)  <input type="checkbox"/> Base fee <input type="checkbox"/> Advanced order <input type="checkbox"/> Assignment recording <input type="checkbox"/> Balance of Issue fee due, if any  Number of advanced order copies requested, <b>10</b> <i>E</i> (must be for 10 or more copies)														

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